

The Northern Virginia Long-Term Care Ombudsman Program presents this  
**“Long-Term Care News & Tips Online”**

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Inside this issue you will find:

- 1. GAO finds that nursing home inspections miss serious violations**
- 2. Geriatric doctor shortage causes alarm**
- 3. MN creates facility rating system that includes residents’ opinions**
- 4. Social activities promote sleep in residents with dementia**
- 5. 20 Common Nursing Home Problems—and How to Resolve Them**
- 6. Emergency supply of drugs under Part D to be expanded**

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**1. GAO finds that nursing home inspections miss serious violations**

According to a new report released by the Government Accountability Office (GAO), state nursing home inspectors often fail to report or underreport “serious deficiencies that cause actual harm or immediate jeopardy” to residents. The report states that most of the recent “significant improvements” in the quality of nursing homes cited by the Bush administration have resulted from inadequate inspections, rather than improved conditions. The GAO found that: 1) states often takes weeks or months to start investigating reports of harm to nursing home residents; 2) some useful information on nursing home quality is available at a federal website, but much of the data were inaccurate or unreliable; 3) the timing of inspections is highly predictable, thus giving homes time to conceal problems; and 4) more than 20% of nursing homes lack automatic sprinkler systems. The report concludes that the decline in serious deficiencies on state surveys “masks two important and continuing issues: inconsistency in how states conduct surveys and understatement of serious quality problems.” Senator Charles Grassley, who, along with Senator Herb Kohl, requested the report, said, “If state surveyors are missing serious deficiencies in the quality of care, then CMS has not yet achieved the necessary level of improvement in its oversight of that process, period. So CMS needs to make high-quality care for nursing home residents a consistent, high priority and get the job done once and for all.” To access the report, entitled “Nursing Homes: Despite Increased Oversight, Challenges Remain in Ensuring High-Quality Care and Resident Safety,” please visit [www.gao.gov/cgi-bin/gettrpt?GAO-06-117](http://www.gao.gov/cgi-bin/gettrpt?GAO-06-117).

**Source:** *New York Times*, January 16, 2006; Kaiser Daily Health Report, January 17, 2006; Memo from the office of Chairman Grassley, January 17, 2006

**2. Geriatric doctor shortage causes alarm**

Medical schools are concerned by the large number of baby boomers aging and the decrease in the number of geriatricians. By the year 2030, 20 percent of the population will be 65 or older — about 70 million Americans. In 1998, there were about 9,000 geriatricians. Today there are just 6,700. Geriatricians are also often among the lowest paid physicians and rely mainly on Medicare reimbursements. Many medical schools are pushing the government to offer students financial incentives to pursue geriatrics.

Source: Article by Mark Mullen, Correspondent NBC News, January 26, 2006

**3. MN creates facility rating system that includes residents’ opinions**

Minnesotans considering a nursing home have a new online tool to help them better assess and choose a facility. The Nursing Home Report Card, which recently began online operation, rates

each of the state's 396 nursing homes. Under the system, each facility gets up to five stars in eight different quality measures. These measures are: resident satisfaction/quality of life ratings; Minnesota quality indicators; hours of direct care; staff turnover; staff retention; temporary staffing agency use; proportion of single rooms; and state inspection results. The resident satisfaction/quality of life rating is based on standardized interviews conducted by trained interviewers in all nursing facilities. The interviews will be continued on an annual basis. To see the questionnaire that is used to interview residents, go to: [www.health.state.mn.us/nhreportcard/mn\\_survey\\_instrument.pdf](http://www.health.state.mn.us/nhreportcard/mn_survey_instrument.pdf). To obtain information from the report card, the user enters a ZIP code and a range of miles, then selects three top priorities from eight quality measures. A list of homes ranked by those criteria then comes up. Clicking on the name of a nursing home will show the number of stars for each quality measure, and the state average. To access the Nursing Home Report Card, go to: [www.health.state.mn.us](http://www.health.state.mn.us).

**Source:** *Associated Press*, January 20, 2006

#### **4. Social activities promote sleep in residents with dementia**

A study published in the September 2005 *Journal of the American Geriatrics Society* reports that individualized social activities like tossing a ball or playing checkers may improve sleep patterns among nursing home residents with dementia. The study of 147 residents from seven facilities employed individualized activities to decrease daytime sleep and lower the day-night sleep ratio in residents with dementia. As a result, participants experienced significantly decreased napping, from about two hours a day to about 1.25 hours a day. Researchers said that by staying engaged in "concrete, reality-based social activities," the residents were able to reduce napping and strengthen their circadian rhythms. The study's authors noted that individualized interventions may provide an alternative to medications.

**Source:** *Provider*, December 2005

#### **5. 20 Common Nursing Home Problems—and How to Resolve Them**

The National Senior Citizens Law Center is proud to issue a new publication that zeroes in on common problems in nursing home care and identifies common nursing facility practices that are actually illegal. *20 Common Nursing Home Problems—and How to Resolve Them* walks the reader through each problem, shows what the law says, and describes how to take positive action. It decodes the law in easy-to-follow language, citing chapter and verse.

For each of the 20 problems, the guide offers a clear explanation of the relevant law, along with careful instructions as to how a resident, family member or advocate should proceed. Some of the issues covered in the guide are:

- When a nursing must follow the preferences of an individual resident;
- When physical restraints and feeding tubes are illegal;
- Why Medicare cannot terminate Part A reimbursement because a resident has "plateaued";
- How to obtain a Medicaid-certified bed for a resident currently in an uncertified bed; and
- When a nursing home must readmit a Medicaid-eligible resident after a hospital stay of several weeks—**or even several months.**

Printed copies of the guide are available for \$9.95, plus \$3 shipping/handling. For faster service and a lesser cost of only \$7.95 each, you can download an electronic copy. For additional

information (including special pricing for orders of more than 10 copies) please call (202) 289-6976 at extension 201.

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**Source:** National Senior Citizens Law Center email

#### **6. Emergency supply of drugs under Part D to be expanded**

The Bush Administration has announced that health insurers offering Medicare drug plans must provide beneficiaries with an additional 60-day emergency supply of medication, an extension that increases the emergency supply requirement under the Medicare prescription drug benefit to a total of 90 days. Last month, the administration instructed insurers to provide beneficiaries with a 30-day emergency supply of any drugs they were taking before the Medicare prescription drug benefit began January 1, 2006. In a news release, the U.S. Department of Health and Human Services said the 60-day extension will allow beneficiaries more time to consider switching to less costly alternatives to their current medications.

**Source:** Kaiser Daily Health Report, February 2, 2006

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Please note that the items are included for informational purposes only and do not imply endorsement by the Northern Virginia Long-Term Care Ombudsman Program or any governmental agency.

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